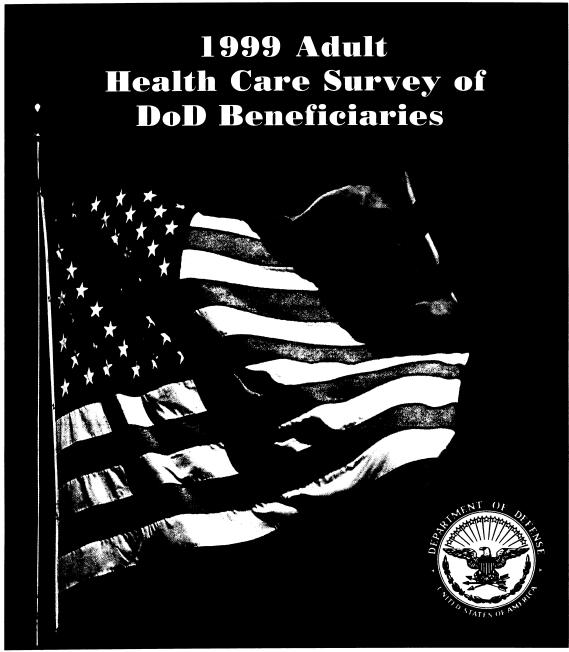
RCS: DD-HA(A) 1942 Expires: 10/14/01



UHC Survey No. 99-0019

RETURN INSTRUCTIONS

Thank you for your participation. Please return the completed questionnaire in the enclosed postage-paid envelope within <u>two weeks</u> of the date of the enclosed letter. If you have misplaced the envelope, our address is:

Office of the Assistant Secretary of Defense Health Affairs Survey Processing Activity c/o Data Recognition Corporation 8900 Wyoming Ave. No. Brooklyn Park, MN 55445

WHY IS THIS SURVEY IMPORTANT?

This survey is sponsored by the Assistant Secretary of Defense (Health Affairs). This health care survey is a large randomized survey of all uniformed service beneficiaries. We are seeking your opinion about your health and your use of health care services. This survey provides an important source of information for decision-makers at all levels within the Department of Defense. This survey provides Department of Defense leaders with a way to systematically measure access and satisfaction with current health care services. Please help us help you.

Your answers will <u>not</u> be shared with anyone and your name will <u>not</u> be associated with your answers. All information that would identify you or your family will be kept private.

You may notice a number on the cover of this survey. This number is only used to let us know if you returned your survey so we don't have to send reminders to you.

PRIVACY NOTICE

According to the Privacy Act of 1974 (Public Law 93-579), the Department of Defense is required to inform you of the purposes and use of this survey. Please read it carefully.

Authority: 10 U.S.C., Chapter 55, Public Law 102-484, E.O. 9397.

Purpose: This survey helps policy makers gauge beneficiary satisfaction with the current military

health care system and provides valuable input from beneficiaries that will be used to

improve the system.

Routine Uses: None

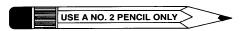
Disclosure: Voluntary. Failure to respond will not result in any penalty to the respondent. However,

maximum participation is encouraged so that data will be as complete and representative

as possible.

INSTRUCTIONS FOR COMPLETING THE SURVEY

• Please use a No. 2 pencil.



- Make heavy black marks that fill the circle for your answer.
- Please do not make stray marks of any kind.

i	V	C	o	R	R	Ε	СТ	М	A	R	Κ	S

CORRECT MARK

(2)







• Unless otherwise specified in the instructions for a question, only <u>one</u> answer should be marked.

Example:

How long has this child lived in his or her current local area?

- Less than 6 months
- O 6-12 months
- 1-3 years
- O More than 3 years

If your answer is "Less than 6 months," then mark just one circle as shown above.

 Sometimes you will be asked to enter a number in a row of boxes. When this occurs, you should write the requested information in the row of boxes and blacken the corresponding circles under the numbers you wrote.

Example:

- What age were you on your last birthday?
- Write the numbers in the boxes, making sure that the last number is always placed in the right-hand box.
- · Fill in the unused boxes with zeros.
- Then, mark the matching circle below each box.

Age

2 6

00 01 02

9 9

	the envelope this questionnaire cam	ling label of e in?	who were in the TR	TOTAL ENGINEERS	Kr
		H99001	220707000	H99006	
1	○ Yes Go to Question 2		1 O Yes		
2	No Please give this questionnaire	to the person	2 🔾 No		
_	on the mailing label, unless that per	son is	3 O Not sure	1	
	permanently incapacitated or incarc completing the questionnaire would impossible. ⇒ Go to Question 89,	erated so that be difficult or	4 O Did not use TRIC	ARE Extra in the last	12 months
	H99001_R See Note 1	page 10	What health plan o covered by? MARI	r health plans are yo KALL THAT APPLY.	ou currently
2	Which health plan did you use most	in the last 12			
-	months? MARK ONLY ONE.	H99002	(Include any health	plan that currently co	
1	○ TRICARE Prime		A () None	1 = mark	
	O TRICARE Senior Prime		B () TRICARE Prime	2 = unma	arked)
2	O TRICARE Extra/Standard (CHAMP	US)	C C TRICARE Senio	r Prime	90%
4	Oivilian health plan		D O TRICARE Extra/	Standard (CHAMPUS	3)
5	O Medicare, Part A and/or Part B		 Medicare Part B 		
	○ Medicaid		F CHAMPUS Supp	olemental health plan	(This is a
	[] A T T T T T T T T T T		all of the costs	nealth plan that cover not covered by TRIC	s some or ARE Extra/
	and the contract of the contra		Standard.)	olon (This is a surela	mental backs
3.	Are you currently enrolled in TRICA	RE Prime or	G () Medigap health	pian (This is a supple	mental nealth
	Senior Prime?	$\overline{}$	plan that cover	rs some or all of the e	xpenses not
	NEW DESIGNATION OF THE STATE OF	H99003	covered by Me	edicare.)	lan mana-
1	() Yes		H () Federal Employe	ees Health Benefits P	rogram
2	○ No		(FEHBP)		
3	○ Not sure		○ Medicaid	alth plan	
			Other civilian he	aim pian	
	61 500 Er 520 53866		K Other		
4.	Out of the last 12 months, how man row have you been covered by TRIC	y months <u>in a</u> CARE Prime?	L Oldon't know.	H99007A-H990	07L
1	<u>row</u> have you been covered by TRIC ○ None ⇒ Go to Question 6	y months <u>in a</u> CARE Prime?	L () I don't know.		
1	have you been covered by TRIC ○ None → Go to Question 6 ○ Less than 2 months	CARE Prime?	L () I don't know.	H99007A-H990	
1 2 3	<u>row</u> have you been covered by TRIC ○ None ⇒ Go to Question 6	CARE Prime?	Your Prev	rentive Health Ca	that is
1 2 3		CARE Prime?	Your Prev	rentive Health Ca	that is
1 2 3 4	None → Go to Question 6 Less than 2 months 2 - 6 months 7 - 12 months H99004_R See Note 2	H99004	Your Prev	rentive Health Ca	that is
1 2 3 4	None → Go to Question 6 Less than 2 months 2 - 6 months 7 - 12 months	H99004	Your Prev Preventive care is med intended to maintain your medical problem, such screening.	rentive Health Ca lical care you receive our good health or pre as a physical or a ch	that is event a future olesterol
1 2 3 4	None → Go to Question 6 Less than 2 months 2 - 6 months 7 - 12 months H99004_R See Note 2 As a member of TRICARE Prime, diprimary care manager based in a manager facility?	H99004 d you have a dilitary or civilian	Your Prev Preventive care is med intended to maintain your medical problem, such screening. 8. Not counting when	rentive Health Ca lical care you receive our good health or pre as a physical or a ch	that is event a future colesterol
1 2 3 4	row have you been covered by TRIC None → Go to Question 6 Less than 2 months 2 - 6 months 7 - 12 months H99004_R See Note 2 As a member of TRICARE Prime, diprimary care manager based in a manager to the second of the se	d you have a dilitary or civilian	Your Prev Preventive care is med intended to maintain your medical problem, such screening. 8. Not counting when when was the last	rentive Health Ca lical care you receive our good health or pre as a physical or a ch n you were sick or p time you had a gen	that is event a future colesterol
1 2 3 4	row have you been covered by TRIC None → Go to Question 6 Less than 2 months 2 - 6 months 7 - 12 months H99004_R See Note 2 As a member of TRICARE Prime, diprimary care manager based in a manager based in a manager based in a manager primary care manager is a health of its your primary point of contact with the	d you have a dilitary or civilian where provider who he health system.	Your Prev Preventive care is med intended to maintain your medical problem, such screening. 8. Not counting when when was the last	rentive Health Ca lical care you receive our good health or pre as a physical or a ch	that is event a future colesterol pregnant, eral medical
1 2 3 4	row have you been covered by TRIC None → Go to Question 6 Less than 2 months 2 - 6 months 7 - 12 months H99004_R See Note 2 As a member of TRICARE Prime, diprimary care manager based in a manager based in a manager based in a manager primary care manager is a health of its your primary point of contact with the problem of the provides routine care, coomits with the problem of the provides routine care, coomits with the problem of the provides routine care, coomits with the problem of the provides routine care, coomits with the problem of the provides routine care, coomits with the provides ro	d you have a dilitary or civilian are provider who he health system. dinates your total	Your Prev Preventive care is med intended to maintain your medical problem, such screening. 8. Not counting when when was the last or physical examination.	rentive Health Ca ical care you receive our good health or pre as a physical or a cha n you were sick or p time you had a gen nation or checkup?	that is event a future colesterol
1 2 3 4	row have you been covered by TRIC None → Go to Question 6 Less than 2 months 2 - 6 months 7 - 12 months H99004_R See Note 2 As a member of TRICARE Prime, diprimary care manager based in a manager	d you have a dilitary or civilian are provider who he health system. dinates your total missions, makes	Your Prev Preventive care is med intended to maintain your medical problem, such screening. 8. Not counting when when was the last or physical examing.	rentive Health Ca dical care you receive our good health or pre- as a physical or a cha- n you were sick or p time you had a gen nation or checkup?	that is event a future colesterol pregnant, eral medical
1 2 3 4	row have you been covered by TRIC None → Go to Question 6 Less than 2 months 2 - 6 months 7 - 12 months H99004_R See Note 2 As a member of TRICARE Prime, diprimary care manager based in a manager	d you have a dilitary or civilian the health system. dinates your total hissions, makes lith records, and	Your Prev Preventive care is med intended to maintain your medical problem, such screening. 8. Not counting when when was the last or physical examins. 5. Less than 12 m. 4. 10 to 2 years ago	rentive Health Ca lical care you receive our good health or pre as a physical or a cha n you were sick or p time you had a gen nation or checkup?	that is event a future colesterol oregnant, eral medical
1 2 3 4	row have you been covered by TRIC None → Go to Question 6 Less than 2 months 2 - 6 months 7 - 12 months H99004_R See Note 2 As a member of TRICARE Prime, diprimary care manager based in a manager	d you have a dilitary or civilian the health system. dinates your total hissions, makes lith records, and	Your Prev Preventive care is med intended to maintain your medical problem, such screening. 8. Not counting when when was the last or physical examins 5. Less than 12 mm. 4. 10 to 2 years ago 2. 10 More than 2 but	rentive Health Ca lical care you receive our good health or pre as a physical or a cha n you were sick or p time you had a gen nation or checkup?	that is event a future colesterol oregnant, eral medical
1 2 3 4	None → Go to Question 6 Less than 2 months 2 - 6 months 7 - 12 months H99004_R See Note 2 As a member of TRICARE Prime, diprimary care manager based in a magnitude of the control o	d you have a dilitary or civilian are provider who he health system. dinates your total hissions, makes lith records, and its services.)	Your Prev Preventive care is med intended to maintain your medical problem, such screening. 8. Not counting when when was the last or physical examination of the counting when when was the last or physical examination of the counting when when was the last or physical examination of the counting when when was the last or physical examination of the counting when we have a counting when	rentive Health Ca lical care you receive our good health or pre as a physical or a ch in you were sick or p time you had a gen nation or checkup?	that is event a future colesterol eregnant, eral medical
1 2 3 4	None → Go to Question 6 Less than 2 months 2 - 6 months 7 - 12 months H99004_R See Note 2 As a member of TRICARE Prime, diprimary care manager based in a material facility? (A primary care manager is a health of its your primary point of contact with the or she provides routine care, coon health care, arranges for hospital admireferrals to specialists, maintains hear recommends preventive and wellness A primary care manager based at (no co-payments required)	d you have a dilitary or civilian are provider who health system, dinates your total hissions, makes the records, and a services.)	Your Prev Preventive care is med intended to maintain your medical problem, such screening. 8. Not counting when when was the last or physical examination of the counting when when was the last or physical examination of the counting when when was the last or physical examination of the counting when when was the last or physical examination of the counting when we have a counting when	rentive Health Ca lical care you receive our good health or pre as a physical or a cha n you were sick or p time you had a gen nation or checkup?	that is event a future colesterol eregnant, eral medical
1 2 3 4	None → Go to Question 6 Less than 2 months 2 - 6 months 7 - 12 months H99004_R See Note 2 As a member of TRICARE Prime, diprimary care manager based in a material facility? (A primary care manager is a health of is your primary point of contact with the or she provides routine care, coon health care, arranges for hospital admireferrals to specialists, maintains hear recommends preventive and wellness A primary care manager based at (no co-payments required) A primary care manager based at	d you have a dilitary or civilian are provider who health system, dinates your total hissions, makes the records, and a services.)	Your Prev Preventive care is med intended to maintain your medical problem, such screening. 8. Not counting when when was the last or physical examination of the counting when when was the last or physical examination of the counting when when was the last or physical examination of the counting when when was the last or physical examination of the counting when we have a counting when	rentive Health Ca lical care you receive our good health or pre as a physical or a ch in you were sick or p time you had a gen nation or checkup?	that is event a future colesterol eregnant, eral medical
1 2 3 4	None → Go to Question 6 Less than 2 months 2 - 6 months 7 - 12 months H99004_R See Note 2 As a member of TRICARE Prime, diprimary care manager based in a material facility? (A primary care manager is a health of its your primary point of contact with the or she provides routine care, coon health care, arranges for hospital admireferrals to specialists, maintains hear recommends preventive and wellness A primary care manager based at (no co-payments required)	d you have a dilitary or civilian are provider who health system, dinates your total hissions, makes the records, and a services.)	Your Prev Preventive care is med intended to maintain your medical problem, such screening. 8. Not counting when when was the last or physical examination of the counting when when was the last or physical examination of the counting when when was the last or physical examination of the counting when when was the last or physical examination of the counting when we have a counting when	rentive Health Ca lical care you receive our good health or pre as a physical or a ch in you were sick or p time you had a gen nation or checkup?	that is event a future colesterol eregnant, eral medical

9. a. When did you last have a blood pressure	15. In the last 12 months, on how many visits were
reading? H99009A	you <u>advised to quit</u> smoking by a doctor or other
	health provider in your plan?
3 Cless than 12 months ago	1 () None
2 1 to 2 years ago	2 0 1 visit
1 O More than 2 years ago	3 \(\) 2 to 4 visits
	4 \(\triangle 5\) to 9 visits
L. D Imposit some blood pressure is too high	0 - 11 - 11 - 11
b. Do you know if your blood pressure is too high	5 O 10 or more visits
or not?	H99015_R See Note 3
H99009B	16. Ave vev mele en femele?
1 O Yes, it's too high.	16. Are you male or female?
2 No, it's not too high.	1 ○ Male → Go to Question 17
3 O Don't know	2 ○ Female → Go to Question 18
	2 O Female - Go to Question 16
10. When did you last have a cholesterol screening,	XSEXA See Note 4 Part A
that is, a test to determine the level of cholesterol	17. When was the last time you had a prostate gland
	examination or blood test for prostate disease?
in your blood?	
	H99017 S Within the last 12 months
5 C Less than 12 months ago	4 O 1 to 2 years ago
$4 \bigcirc 1$ to 2 years ago $3 \bigcirc$ More than 2 but less than 5 years ago	3 O More than 2 but less than 5 years ago
2 ○ 5 or more years ago	2 O 5 or more years ago
1 O Never had a cholesterol screening	1 O Never had a prostate gland examination
Never riad a cholesteror screening	H99017 R See Note 4 Part B
	Go to question 22, page 6
11. When did you last have a flu shot?	do to question 22, page o
11. When did you last have a nu shot:	18. When did you last have a Pap smear test?
4 C Less than 12 months ago H99011	10. When did you last have a r up sinear test:
3 O 1 - 2 years ago	5 O Within the last 12 months H99018
2 O More than 2 years ago	4 O 1 to 3 years ago
1 O Never had a flu shot	3 O More than 3 but less than 5 years ago
1 O Never had a hu shot	2 0 5 or more years ago
	1 Never had a Pap smear test
12. Have you ever <i>smoked</i> at least 100 cigarettes in	H99018_R See Note 4 Part C
your entire life?	[H99016_K See Note 4 Part C
your entire life? (H99012	19. a. Are you under age 40?
1 () Yes	H99019A
2 ○ No ⇒ Go to Question 16	1 ○ Yes → Go to Question 20, page 6
3 ○ Don't know ⇒ Go to Question 16	2 ○ No ⇒ Go to Question 19b
H99012_R See Note 3	H99019AR See Notes 4C and 5
13. Do you now smoke everyday, some days or not	b. When was the last time your breasts were
	checked by mammography?
H99013	
4 ○ Every day → Go to Question 15	5 () Within the last 12 months
3 ○ Some days → Go to Question 15	4 O 1 to 2 years ago
2 O Not at all	3 O 2 years to less than 5 years ago
2 ○ Not at an 1 ○ Don't know ➡ Go to Question 15	2 0 5 or more years ago
	1 Never had a mammogram
[H99013_R See Note 3]	
14. How long has it been since you <i>quit smoking</i>	H99019BR See Notes 4C and 5
cigarettes?	c. When was the last time you had a breast
H99014	physical exam by a health care professional?
3 C Less than 12 months	
2 ○ 12 months or more → Go to Question 16	5 Within the last 12 months H99019C
1 ○ Don't know ⇒ Go to Question 16	4 O 1 to 2 years ago
H99014_R See Note 3	3 O 2 years to less than 5 years ago
	2 O 5 or more years ago
USE NO. 2 PENCIL ONLY	1 O Never had a breast physical exam
-	H99019CR See Notes 4C and 5

are you pregnant now?	H99020)	persona	al doctor or nurse?		H99024
1 ○ Yes, I am currently pregnant.	Go to Question) n 21a	1 O Yes			
2 No, I am not currently pregnant	but have been			Go to Question 2	6	
pregnant in the past 12 month	ns		· · · · · · · · · · · · · · · · · · ·		<u> </u>	
⇒ Go to Question 21b			Паас	024_R See Note 8	J	
3 O No, I am not currently pregnant	, and have not b	peen	25. We wan	t to know your rati	ng of yo	our persona
pregnant in the past 12 month	ns.		doctor	or nurse.		H99025
➡ Go to Question 22					L	
H99020_R See Notes 4C and	6			number from 0 to		
		i		I doctor or nurse po		
21. a. In what trimester is your preg	nancy?			I doctor or nurse pos		
4.0=	[11000014	۱ I	rate you	r personal doctor or	nurse n	ow?
1 O First trimester	H99021A	J	\bigcirc 0	Worst personal dod	tor or ni	urea noccible
2 ○ Second trimester3 ○ Third trimester		İ	01	Worst personal doc	.101 01 111	urse possible
5 O Inira trimester		ļ	O 2			
H99021AR See Notes 4C and	6		\bigcirc 3			
b. In which trimester did you firs		atal	\bigcirc 4			
care?	J COC. FE PI GIR		O 5			
Cale:	H99021B)	$\overset{\smile}{\bigcirc}$ 6			
4 O First trimester)	O 7			
3 O Second trimester			○ 8			
2 () Third trimester			○ 9			
1 O Did not receive prenatal care	Э		○ 10	Best personal doct		
H99021BR See Notes 4 C and	_		-6 ⊜ I dor	n't have a personal c	loctor or	nurse.
			0			
Your Personal Doctor	or Nurse			ng Health Care	from a	Specialis
Your Personal Doctor of The next questions ask about your ownot include care you got when you sta	or Nurse vn health care. ayed overnight in	na	Getti When you a	answer the next que		
Your Personal Doctor	or Nurse vn health care. ayed overnight in	na	Getti	answer the next que		
The next questions ask about your ownot include care you got when you state hospital. Do not include the times you care visits.	or Nurse vn health care. ayed overnight ir u went for denta	na I	Getti When you a dental visits 26. Special	answer the next que s. l <u>ists</u> are doctors lik	stions, <u>c</u>	do not includ
The next questions ask about your ownot include care you got when you state hospital. Do not include the times you care visits.	or Nurse vn health care. ayed overnight in u went for denta	n a I	When you a dental visits 26. Special doctors	answer the next que s. lists are doctors lik s, allergy doctors, s	stions, <u>c</u> se surge	do not includ eons, heart ctors, and o
The next questions ask about <u>your ownot</u> include care you got when you state hospital. <u>Do not</u> include the times you care visits. 22. <u>A personal doctor or nurse</u> is the who knows you best. This can be	or Nurse vn health care. ayed overnight in u went for denta the health provice the a general do	n a I	When you a dental visits 26. Special doctors	answer the next que s. l <u>ists</u> are doctors lik	stions, <u>c</u> se surge	do not includ eons, heart ctors, and o
The next questions ask about your ownot include care you got when you state hospital. Do not include the times you care visits. 22. A personal doctor or nurse is the who knows you best. This can laspecialist doctor, a nurse prace	or Nurse vn health care. ayed overnight in u went for denta the health provice the a general do	n a I	When you a dental visits 26. Special doctors who sp	answer the next que s. l <u>ists</u> are doctors lik s, allergy doctors, s recialize in one area	stions, <u>c</u> ce surge skin doo a of hea	eons, heart ctors, and o
Your Personal Doctor of The next questions ask about your ownot include care you got when you state hospital. Do not include the times you care visits. 22. A personal doctor or nurse is the who knows you best. This can be a second or not the times you who knows you best.	or Nurse vn health care. ayed overnight in u went for denta the health provice the a general do	n a I	When you a dental visits 26. Special doctors who sp	answer the next que s. lists are doctors lik s, allergy doctors, s ecialize in one area ast 12 months, did	stions, <u>c</u> ce surge skin doo a of hea you or a	eons, heart ctors, and o lith care.
The next questions ask about your ownot include care you got when you state hospital. Do not include the times you care visits. 22. A personal doctor or nurse is the who knows you best. This can least a specialist doctor, a nurse prace physician assistant.	or Nurse vn health care. ayed overnight in the went for dental the health provides the a general do thitioner, or a	der octor,	When you a dental visits 26. Special doctors who sp	answer the next que s. l <u>ists</u> are doctors lik s, allergy doctors, s recialize in one area	stions, <u>c</u> ce surge skin doo a of hea you or a	eons, heart ctors, and o
The next questions ask about your ownot include care you got when you state hospital. Do not include the times you care visits. 22. A personal doctor or nurse is the who knows you best. This can be a specialist doctor, a nurse prace physician assistant. When you joined your health plate.	or Nurse vn health care. ayed overnight in went for denta the health provice the a general do the titioner, or a	der octor,	When you a dental visits 26. Special doctors who sp In the layou need	answer the next que s. lists are doctors lik s, allergy doctors, s ecialize in one area ast 12 months, did	stions, <u>c</u> ce surge skin doo a of hea you or a	eons, heart ctors, and o lith care.
Your Personal Doctor of The next questions ask about your ownot include care you got when you state hospital. Do not include the times you care visits. 22. A personal doctor or nurse is the who knows you best. This can be a specialist doctor, a nurse prace physician assistant. When you joined your health plasince then, did you get a new personal new personal doctor.	or Nurse vn health care. ayed overnight in went for denta the health provice be a general do tititioner, or a an or at any time	der octor,	Getti When you a dental visits 26. Special doctors who sp In the la you nee	answer the next que s. lists are doctors likes, allergy doctors, secialize in one area ast 12 months, dideded to see a spec	stions, <u>c</u> se surge skin doo a of hea you or s ialist?	eons, heart ctors, and outline care. H99026
Your Personal Doctor of The next questions ask about your owner include care you got when you state hospital. Do not include the times you care visits. 22. A personal doctor or nurse is the who knows you best. This can be a specialist doctor, a nurse prace physician assistant. When you joined your health place.	or Nurse vn health care. ayed overnight in went for denta the health provice the a general do the titioner, or a	der octor,	Getti When you a dental visits 26. Special doctors who sp In the layou need 1 Yes 2 No •	answer the next que s. lists are doctors like, allergy doctors, secialize in one area ast 12 months, did eded to see a spec Go to Question 3	stions, <u>c</u> se surge skin doo a of hea you or s ialist?	eons, heart ctors, and outline care. H99026
Your Personal Doctor of The next questions ask about your owner include care you got when you state hospital. Do not include the times you care visits. 22. A personal doctor or nurse is the who knows you best. This can be a specialist doctor, a nurse prace physician assistant. When you joined your health plasince then, did you get a new person nurse?	or Nurse vn health care. ayed overnight in went for denta the health provice be a general do tititioner, or a an or at any time	der octor,	Getti When you a dental visits 26. Special doctors who sp In the layou need 1 Yes 2 No •	answer the next que s. lists are doctors likes, allergy doctors, secialize in one area ast 12 months, dideded to see a spec	stions, <u>c</u> se surge skin doo a of hea you or s ialist?	eons, heart ctors, and outline care. H99026
Your Personal Doctor of The next questions ask about your owned include care you got when you state hospital. Do not include the times you care visits. 22. A personal doctor or nurse is the who knows you best. This can least a specialist doctor, a nurse prace physician assistant. When you joined your health plasince then, did you get a new penurse?	or Nurse vn health care. ayed overnight in went for denta the health provice be a general do tititioner, or a an or at any time	der octor,	Getti When you a dental visits 26. Special doctors who sp In the layou need 1 1 Yes 2 No H990	answer the next que s. lists are doctors like, allergy doctors, secialize in one area ast 12 months, did eded to see a spec Go to Question 3	stions, <u>c</u> se surge skin doc a of hea you or a ialist?	eons, heart ctors, and o lith care. H99026
Your Personal Doctor of The next questions ask about your owner include care you got when you state hospital. Do not include the times you care visits. 22. A personal doctor or nurse is the who knows you best. This can be a specialist doctor, a nurse prace physician assistant. When you joined your health plasince then, did you get a new person nurse?	or Nurse vn health care. ayed overnight in went for denta the health provice be a general do tititioner, or a an or at any time	der octor,	Getti When you a dental visits 26. Special doctors who sp In the layou need 1 O Yes 2 No 1 H990 27. In the layou	answer the next que s. lists are doctors likes, allergy doctors, secialize in one area ast 12 months, did eded to see a spec → Go to Question 3	stions, <u>c</u> se surge skin doc a of hea you or s ialist?	eons, heart ctors, and outline care. H99026
Your Personal Doctor of The next questions ask about your ownot include care you got when you state hospital. Do not include the times you care visits. 22. A personal doctor or nurse is the who knows you best. This can be a specialist doctor, a nurse prace physician assistant. When you joined your health plasince then, did you get a new penurse? 1 ○ Yes 2 ○ No ➡ Go to Question 24 H99022_R See Note 7	or Nurse vn health care. ayed overnight in the health provides a general destitioner, or a an or at any time ersonal doctor H99022	der octor,	Getti When you a dental visits 26. Special doctors who sp In the layou need to the poor of the poor	answer the next que s. lists are doctors liks, allergy doctors, secialize in one area ast 12 months, did eded to see a spec → Go to Question 3 026_R See Note 9 ast 12 months, how	stions, <u>c</u> se surge skin doc a of hea you or s ialist?	eons, heart ctors, and outline care. H99026
Your Personal Doctor of The next questions ask about your ownot include care you got when you state hospital. Do not include the times you care visits. 22. A personal doctor or nurse is the who knows you best. This can be a specialist doctor, a nurse prace physician assistant. When you joined your health plasince then, did you get a new penurse? 1 ○ Yes 2 ○ No ➡ Go to Question 24 H99022_R See Note 7	or Nurse vn health care. ayed overnight in the health provides a general destitioner, or a an or at any times and the destitioner of the least open open of the least open of the least open of the least open of the least open open open open open open open open	der octor,	Getti When you a dental visits 26. Special doctors who sp In the layou need to help	answer the next que s. lists are doctors like, allergy doctors, secialize in one area ast 12 months, dideded to see a spec Go to Question 3 26_R See Note 9 ast 12 months, how as it to get a referral to see?	stions, <u>c</u> se surge skin doc a of hea you or s ialist?	eons, heart ctors, and outline care. a doctor this H99026
Your Personal Doctor of The next questions ask about your ownot include care you got when you state hospital. Do not include the times you care visits. 22. A personal doctor or nurse is the who knows you best. This can be a specialist doctor, a nurse prace physician assistant. When you joined your health plasince then, did you get a new penurse? 1 ○ Yes 2 ○ No ⇒ Go to Question 24 H99022_R See Note 7 23. With the choices your health plasmuch of a problem, if any, was in the street of the problem.	or Nurse vn health care. ayed overnight in the health provides a general destitioner, or a an or at any times and the destitioner of the least open open open of the least open of the least open of the least open open open open open open open open	der octor,	Getti When you a dental visits 26. Special doctors who sp In the layou need to help t	answer the next que s. lists are doctors lik s, allergy doctors, s ecialize in one area ast 12 months, did eded to see a spec → Go to Question 3 026_R See Note 9 ast 12 months, how as it to get a referra it to see? g problem	stions, <u>c</u> se surge skin doc a of hea you or s ialist?	eons, heart ctors, and outline care. H99026
Your Personal Doctor of The next questions ask about your ownot include care you got when you state hospital. Do not include the times you care visits. 22. A personal doctor or nurse is the who knows you best. This can be a specialist doctor, a nurse prace physician assistant. When you joined your health plasince then, did you get a new penurse? 1 ○ Yes 2 ○ No ⇒ Go to Question 24 H99022_R See Note 7 23. With the choices your health plasince then plasince then the choices your health plasince the choices your health p	or Nurse vn health care. ayed overnight in the health provides a general destitioner, or a an or at any times and the destitioner of the least open open open of the least open of the least open of the least open open open open open open open open	der octor,	Getti When you a dental visits 26. Special doctors who sp In the layou need to help	answer the next que iss. lists are doctors lik s, allergy doctors, secialize in one area ast 12 months, did eded to see a spec Go to Question 3 26_R See Note 9 ast 12 months, how as it to get a referra I to see? g problem nall problem	stions, <u>c</u> se surge skin doc a of hea you or s ialist?	eons, heart ctors, and outline care. a doctor this H99026
Your Personal Doctor of The next questions ask about your ownot include care you got when you state hospital. Do not include the times you care visits. 22. A personal doctor or nurse is the who knows you best. This can be a specialist doctor, a nurse prace physician assistant. When you joined your health plasince then, did you get a new pernurse? 1 ○ Yes 2 ○ No ➡ Go to Question 24 H99022_R See Note 7 23. With the choices your health plasmuch of a problem, if any, was in the polynomial in the choices your health plasmuch of a problem, if any, was in the choices your health plasmuch of a problem, if any, was in the choice in the choic	or Nurse vn health care. ayed overnight in u went for denta the health provides a general destitioner, or a an or at any timersonal doctor H99022 an gave you, he t to get a person with?	der octor,	Getti When you a dental visits 26. Special doctors who sp In the layou need 1 Yes 2 No H990 27. In the lany, wa needed 1 A bid 2 A sr 2 Not	answer the next que s. lists are doctors liks, allergy doctors, secialize in one area ast 12 months, did eded to see a spec Go to Question 3 26_R See Note 9 ast 12 months, how as it to get a referral to see? g problem nall problem a problem	stions, <u>c</u> se surgeskin doos of hea you or sialist? se, page	eons, heart ctors, and o lith care. a doctor this H99026
Your Personal Doctor of The next questions ask about your ownot include care you got when you state hospital. Do not include the times you care visits. 22. A personal doctor or nurse is the who knows you best. This can be a specialist doctor, a nurse prace physician assistant. When you joined your health plasince then, did you get a new penurse? 1 ○ Yes 2 ○ No ➡ Go to Question 24 H99022_R See Note 7 23. With the choices your health plasmuch of a problem, if any, was it doctor or nurse you are happy was it of the problem.	or Nurse vn health care. ayed overnight in the health provides a general destitioner, or a an or at any times and the destitioner of the least open open open of the least open of the least open of the least open open open open open open open open	der octor,	Getti When you a dental visits 26. Special doctors who sp In the layou need 1 Yes 2 No H990 27. In the lany, wa needed 1 A bid 2 A sr 2 Not	answer the next que iss. lists are doctors lik s, allergy doctors, secialize in one area ast 12 months, did eded to see a spec Go to Question 3 26_R See Note 9 ast 12 months, how as it to get a referra I to see? g problem nall problem	stions, <u>c</u> se surgeskin doos of hea you or sialist? se, page	eons, heart ctors, and o lith care. a doctor this H99026
Your Personal Doctor of the next questions ask about your ownot include care you got when you state hospital. Do not include the times you care visits. 22. A personal doctor or nurse is the who knows you best. This can be a specialist doctor, a nurse prace physician assistant. When you joined your health plasince then, did you get a new personarse? 1 ○ Yes 2 ○ No ⇒ Go to Question 24 H99022_R See Note 7 23. With the choices your health plasmuch of a problem, if any, was inductor or nurse you are happy were a controlled.	or Nurse vn health care. ayed overnight in u went for denta the health provides a general destitioner, or a an or at any timersonal doctor H99022 an gave you, he t to get a person with?	der octor,	Getti When you a dental visits 26. Special doctors who sp In the layou need to the land of the land	answer the next que s. lists are doctors liks, allergy doctors, secialize in one area ast 12 months, did eded to see a spece → Go to Question 3 226_R See Note 9 ast 12 months, how as it to get a referral to see? If to see? If problem a problem a problem in the ed to see a spece as per a spece a	stions, <u>c</u> se surgeskin doos of hea you or sialist? se, page	eons, heart ctors, and o lith care. a doctor this H99026
Your Personal Doctor of the next questions ask about your ownot include care you got when you state hospital. Do not include the times you care visits. 22. A personal doctor or nurse is the who knows you best. This can be a specialist doctor, a nurse prace physician assistant. When you joined your health plasince then, did you get a new personal your health plasince then, did you get a new personal yes. 1 Yes 2 No ⇒ Go to Question 24 H99022_R See Note 7 23. With the choices your health plasmuch of a problem, if any, was it doctor or nurse you are happy we have you are happy we ha	or Nurse yn health care. ayed overnight in y went for denta the health provice be a general doctitioner, or a an or at any time ersonal doctor H99022 an gave you, ho t to get a perso with?	der octor,	Getti When you a dental visits 26. Special doctors who sp In the layou need to the special of	answer the next que is are doctors likes, allergy doctors, secialize in one area ast 12 months, did eded to see a spec Go to Question 3 26_R See Note 9 ast 12 months, how as it to get a referra it to see? g problem nall problem a problem in't need to see a spec 27_R See Note 9	stions, <u>c</u> se surgeskin doca of hea you or a ialist? in the control of the contr	eons, heart ctors, and of a problem pecialist that the last 12 in
Your Personal Doctor of the next questions ask about your ownot include care you got when you state hospital. Do not include the times you care visits. 22. A personal doctor or nurse is the who knows you best. This can be a specialist doctor, a nurse prace physician assistant. When you joined your health plasince then, did you get a new personarse? 1 ○ Yes 2 ○ No ⇒ Go to Question 24 H99022_R See Note 7 23. With the choices your health plasmuch of a problem, if any, was inductor or nurse you are happy were a controlled.	or Nurse yn health care. ayed overnight in y went for denta the health provice be a general doctitioner, or a an or at any time ersonal doctor H99022 an gave you, ho t to get a perso with?	der octor,	Getti When you a dental visits 26. Special doctors who sp In the layou need to la	answer the next que is are doctors like, allergy doctors, secialize in one area ast 12 months, did eded to see a spec Go to Question 3 226_R See Note 9 ast 12 months, how as it to get a referral to see? g problem nall problem a problem in't need to see a spec 227_R See Note 9 ast 12 months, did	stions, <u>c</u> se surgeskin doca of hea you or a ialist? in the control of the contr	eons, heart ctors, and of a problem pecialist that the last 12 in
Your Personal Doctor of the next questions ask about your ownot include care you got when you state hospital. Do not include the times you care visits. 22. A personal doctor or nurse is the who knows you best. This can be a specialist doctor, a nurse prace physician assistant. When you joined your health plasince then, did you get a new personal your health plasince then, did you get a new personal yes. 1 Yes 2 No ⇒ Go to Question 24 H99022_R See Note 7 23. With the choices your health plasmuch of a problem, if any, was it doctor or nurse you are happy we have you are happy we ha	or Nurse yn health care. ayed overnight in y went for denta the health provice be a general doctitioner, or a an or at any time ersonal doctor H99022 an gave you, ho t to get a perso with?	der octor,	Getti When you a dental visits 26. Special doctors who sp In the light you need to see the	answer the next que is are doctors like, allergy doctors, secialize in one area ast 12 months, did eded to see a spec Go to Question 3 226_R See Note 9 ast 12 months, how as it to get a referral to see? g problem nall problem a problem in't need to see a spec 227_R See Note 9 ast 12 months, did	stions, <u>c</u> se surge skin doo a of hea you or a lalist? 2, page you much al to a specialist in you see	do not include the cons, heart ctors, and outline care. a doctor this H99026 7 of a problem pecialist that H99027 In the last 12 e a specialise H99028

29. In the last 12 months, when you no <u>appointment with a specialist</u> , suc allergy, or skin doctor, how often o	ch as a surgeon, did you have to	Calling for Health Care	
wait more than the time requested	l by the referring	32. In the last 12 months, did yo	
provider?	H99029	or clinic <u>during regular offic</u>	
1 0 11		advice for yourself?	H99032
1 O Never		1 O Yes	
2 ○ Sometimes 3 ○ Usually		2 No ⇒ Go to Question 34	
4 O Always			1
-5 O I don't know.		H99032_R See Note 11	J
-6 ○ I didn't need to get this type of ca	re in the last 12	33. In the last 12 months, when	you called during
months.	ire iii tiie last 12	regular office hours, how of	
		help or advice you needed?	, —
H99029_R See Note 10		_	H99033
		1 O Never	
0. We want to know your rating of the	e specialist you	2 O Sometimes	
saw most often in the last 12 mon	ths, including a	3 O Usually	
personal doctor if he or she was a	specialist.	4 O Always	
		-6 O I didn't call for medical hel	
Use any number from 0 to 10 when	re 0 is the worst	regular office hours in th	e last 12 months.
specialist possible, and 10 is the bes	st specialist		
possible. How would you rate your s	specialist?	24 In the lest 40 menths did	ou call your regions!
0 - 111 - 111 - 111 - 1		34. In the last 12 months, did yo health care advice and educ	ou can your regional
0 Worst specialist possible	H99030	referred to as the Healthcar	
01			e illiorillation Line
O 2		(HCIL)?	H99034
\bigcirc 3		1 O Yes	
O 4		2 ○ No ⇒ Go to Question 36	
○ 5 ○ 6		- © 140 4 do to question so	
<u> </u>		H99034_R See Note 12	Ì
○ 7 ○ 8		35. In the last 12 months, when	vou called vour
○ 8 ○ 9		regional advice line, how of	ten did you <i>get</i> the
○ 10 Best specialist possible		help or advice you needed	
-6 O I didn't see a specialist in the last	t 12 months.		
o o o o o o o o o o o o o o o o o o o	. 12	1 O Never	H99035
H99030_R See Note 10		2 O Sometimes	
(100000_11 000110101010		3 Ousually	
1. In the last 12 months, was the spe	cialist vou saw	4 O Always	
most often the same doctor as yo	ur personal	-6 O I didn't call my regional ad	lvice line for help or
doctor?	H99031	advice in the last 12 mor	
(1199031		
1 O Yes			
2 🔾 No		36. In the last 12 months, how o	often did you have to
-6 O I don't have a personal doctor or		make <u>3 or more</u> phone calls	
specialist in the last 12 months		make an appointment for yo	ourself with a health
[J2224 B 2 N 4 42]		care professional?	H99036
H99031_R See Note 10		4 C Navan	
		1 O Never 2 O Sometimes	
		3 O Usually	
		4 O Always	unnaintmente for mucalf
		-6 O I did not try to make any a in the last 12 months.	uppointments for myself
USE NO. 2 PENCIL ONLY	>>	in the last 12 months.	
		1	
	-	7-	
		· — —	

Your Health Care in the Last 12 Months

This section refers to all the health care you received in the last 12 months, including all the health facilities, and providers you may have used over that 12 month period. When you answer the next questions, <u>do not</u> include dental visits.

When you answer the next que dental visits.	estions, <u>do not</u> include				
37. In the last 12 months, wh go to most often for heal ONE ANSWER.	at type of facility did you th care? MARK ONLY				
(Please think about the type of facility (military or civilian) you select below when you answer questions 38 through 55.)					
1 O A military facility – This					
Military clinic Military hospital (inclu PRIMUS clinic NAVCARE clinic					
2 A civilian facility – This Doctor's office	includes:				
Clinic Hospital					
Civilian TRICARE co	ntractor				
	Family Health Plan facility				
(USFHP) Veterans Affairs (VA)	clinic or hospital				
. ,					
3 O I went to neither type o	f health care facility in the				
last 12 months.	7 10				
→ Go to Question 5					
H99037_R See Note 13	3				
38. In the last 12 months, di	d you go to an <u>emergency</u>				
room for your own care?	H99038				
1 ○ Yes ⇒ Go to Questio i					
2 ○ No → Go to Question	40				
3 ○ Not sure → Go to Que					
H99038_R See Notes	s 13 and 14				
■ 1 = marke	hs? MARK ALL THAT APPLY. ed 2 = unmarked				
	ill and needed to be seen				
right away.B ○ A health care provider,	advice line, or clinic staff				
advised me to go the	ere.				
C ○ It was after regular doc	ctor's office or clinic hours.				
D O I was out of the area o					
- F () It was loss expensive f					
	of file.				
F ○ It was more convenien	t for me.				
F It was more convenienG I couldn't get off work of	t for me. during regular doctor's office				
F	t for me. during regular doctor's office				
F	t for me. during regular doctor's office				
F Olt was more convenien G Ol couldn't get off work of or clinic hours. H Olt was difficult to get ar office or clinic. I O Not sure	t for me. during regular doctor's office appointment at a doctor's H99039A-H99039J				
F Olt was more convenien G Ol couldn't get off work of or clinic hours. H Olt was difficult to get ar office or clinic. ONot sure J Oldid not go to an emerge	t for me. during regular doctor's office				

	to an emergency room) how ma go to a <u>doctor's office or clinic</u> care facility to get care for you	in a <i>military</i> health
4 5 6 7	0 2 0 3 0 4 0 5 to 9	H99040
71.	to an emergency room) how mago to a <u>doctor's office or clinic</u> care facility to get care for you	any times did you in a <i>civilian</i> health
3 4 5	 None 1 2 3 4 5 to 9 10 or more H99041_R See Note 13 	H99041
42.	In the last 12 months, when yo patient visit, such as a physical how often did you have to wait	ıl exam or check-u
2 3 4	 Never Sometimes Usually Always I don't know. I didn't need to get this type of months. 	H99042 of care in the last 12
43.	In the last 12 months, when yo appointment for a <u>routine visit</u> problems that were not urgent you have to <u>wait more than 7 co</u>	, for health , how often did
1 2 3 4 -5 -6	 Never Sometimes Usually Always I don't know. I had no visits in the last 12 n H99043_R See Note 13 	H99043
	USE NO. 2 PENCIL O	NLY

40. In the last 12 months (not counting times you went

44. In the last 12 months, when you needed urgent care for an <u>acute (serious) illness or injury</u> , such as a broken arm or shortness of breath, how often	49. In the last 12 months, how often did office staff at a doctor's office or clinic treat you with courtesy and respect?
did you get care within <u>24 hours</u> ?	1 O Never H99049
1 O Nover H99044	2 O Sometimes
1 O Never	3 O Usually
2 O Sometimes	
3 O Usually	4 O Always
4 O Always	-6 O I had no visits in the last 12 months.
-5 O I don't know.	H99049_R See Note 13
-6 \bigcirc I had no visits in the last 12 months.	
H99044_R See Note 13	-
H99044_R See Note 13	50. In the last 12 months, how often were office staff at
	a doctor's office or clinic as <u>helpful</u> as you thought —
45. In the last 12 months, how often did it take you	they should be?
more than 30 minutes to travel to the facility	H99050 -
where you visit your primary care manager?	1 O Never
H99045	2 O Sometimes
1 O Never	3 O Usually
2 O Sometimes	4 O Always
3 O Usually	-6 O I had no visits in the last 12 months.
4 O Always	(U22252 D. O. N. (122)
-5 O I don't know.	H99050_R See Note 13
-6 ○ I had no visits in the last 12 months.	_
-0 O That no visits in the last 12 months.	51. In the last 12 months, how often did doctors or
[H99045_R See Note 13]	other health providers listen carefully to you?
	other health providers <u>instern cure runy to you</u> :
and the second s	1 O Never H99051
46. In the last 12 months, how often did you wait in the	1 O Never
doctor's office or clinic more than 30 minutes past	2 O Sometimes
the appointment time to see the person you went	3 O Usually
to see?	4 O Always
1 O Never	-6 O I had no visits in the last 12 months.
2 O Sometimes	H99051_R See Note 13
3 ○ Usually	
4 O Always	-
-5 🔾 I don't know.	52. In the last 12 months, how often did doctors or
-6 O I had no visits in the last 12 months.	other health providers <u>explain things</u> in a way
	you could understand?
H99046_R See Note 13	H99052
	1 O Never
47. In the last 12 months, how much of a problem, if	2 O Sometimes -
any, was it to get care for yourself that you or a	3 ○ Usually —
doctor believed necessary? H99047	4 O Always
1199047	_6 ○ I had no visits in the last 12 months.
1	
2 A small problem	H99052_R See Note 13
3 O Not a problem	_
-6 ○ I had no visits in the last 12 months.	53. In the last 12 months, how often did doctors or
O O FRIED HORO III the last 12 months.	other health providers show <u>respect for what</u>
H99047_R See Note 13	you had to say?
	H99053
48. In the last 12 months, how much of a problem, if	1 O Never
any, were delays in your health care while you	2 O Sometimes
	3 O Usually
waited for approval from your health plan?	4 O Always
1 O A hig problem H99048	-6 O I had no visits in the last 12 months.
	-0 O Friad no visits in the last 12 months.
2 O A small problem	H99053_R See Note 13
3 O Not a problem	
-6 \bigcirc I had no visits in the last 12 months.	_
[100049 B Con Note 42]	_ ,
H99048_R See Note 13	- <u>}</u>
•	9

= 54. In the last 12 months, how often did doctors or other health providers <u>spend enough time</u> with you?	58. In the last 12 months, how often did your health plan handle your claims <u>in a reasonable time</u> ?
1 Never 2 Sometimes 3 Usually 4 Always -6 I had no visits in the last 12 months. H99054_R See Note 13 55. We want to know your rating of all your health care	1 Never H99058 2 Sometimes 3 Usually 4 Always -5 Don't know -6 No claims were sent to my health plan in the last 12 months.
in the last 12 months from all doctors and other health providers. H99055 Use any number from 0 to 10 where 0 is the worst health care possible, and 10 is the best health care possible. How would you rate all your health care?	59. In the last 12 months, how often did your health plan handle your claims <i>correctly</i> ? 1 Never 2 Sometimes 3 Usually
 0 Worst health care possible 1 2 3 	4 ○ Always -5 ○ Don't know -6 ○ No claims were sent to my health plan in the last 12 months.
 4 5 6 7 8 9 10 Best health care possible -6 I had no visits in the last 12 months. 	60. In the last 12 months, before you went for care, how often did your health plan make it clear how much you would have to pay? 1 Never 2 Sometimes 3 Usually 4 Always -5 Don't know
H99055_R See Note 13 56. In the last 12 months, how many prescriptions did you have that were written by a civilian provider but were filled at a military pharmacy? Please include refills. H99056 1 1 to 6 prescriptions and/or refills	 -6 No claims were sent to my health plan in the last 12 months. 61. In the last 12 months, how much "out-of-pocket" money did you and your family members who were eligible for your military medical benefits spend on medical care, including premiums, enrollment fees,
 2 0 1 to 6 prescriptions and/or refills 3 7 to 12 prescriptions and/or refills 4 More than 12 prescriptions and/or refills No prescriptions or refills H99056_R See Note 13 	deductibles, co-insurance, and co-payments, that was not reimbursed by a health plan? <u>Do not include dental expenses</u> . (If you have family coverage, include expenditures for yourself and all covered family members. Include
Your Health Plan The next questions ask about your experience with your	prescription medications, but do not include over-the-counter medications. If you do not know the exact amount, estimate the amount.) H99061A No expenses in the last 12 months 1 = marked
 primary health plan. Your primary health plan is the one you used most in the last 12 months. 57. Claims are sent to a health plan for payment. You may send in your claim yourself, or doctors, hospitals, or others may do this for you. 	## Sper year Write the number in the boxes. → □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □
In the last 12 months, did you or anyone else <u>send</u> in any claims for yourself to your health plan? H99057 1 ○ Yes 2 ○ No → Go to Question 60 3 ○ Don't know → Go to Question 60 H99057 R See Note 15	9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9
	0 - H99061AR and H99061BR See Note 16

62. In the last 12 months, did you look for any information in written materials from your health plan?	68. In the last 12 months, have you called or written your health plan with a complaint or problem?
1	1 ○ Yes 2 ○ No → Go to Question 71 H99068_R See Note 20 69. How long did it take for your health plan to resolve
63. In the last 12 months, how much of a problem, if any, was it to find or understand information in the written materials? H99063 1	your complaint? 1
64. In the last 12 months, did you call the health plan's <u>customer service</u> to get information or help? 1 ○ Yes 2 ○ No → Go to Question 66 H99064_R See Note 18 65. In the last 12 months, how much of a problem, if any, was it to get the help you needed when you	70. Was your <u>complaint or problem</u> settled to your satisfaction? H99070 1 Yes 2 No 3 I am still waiting for it to be settled6 I haven't called or written with a complaint in the last 12 months.
called your health plan's customer service? 1	71. We want to know your rating of all your experience with your health plan. Use any number from 0 to 10 where 0 is the worst health plan possible, and 10 is the best health plan possible. How would you rate your health plan now?
66. <u>Paperwork</u> means things like getting your ID card, having your records changed, processing forms, or other paperwork related to getting care for yourself. In the last 12 months, did you have any experiences with paperwork for your health plan? 1 ○ Yes 2 ○ No ➡ Go to Question 68 H99066_R See Note 19	O Worst health plan possible 1 2 3 4 5 6 7 8 9 10 Best health plan possible
67. In the last 12 months, how much of a problem, if any, did you have with paperwork for your health plan? 1	72. If you are currently enrolled in TRICARE Prime, how likely are you to disenroll from TRICARE Prime for a different type of health plan in the next 12 months? 1 Very unlikely 2 Unlikely 3 Neither likely nor unlikely 4 Likely 5 Very likely -5 Not sure -6 I am not currently enrolled in TRICARE Prime.

73.	next 12 months?		Н	99073		
	○ Very unlikely					
	○ Unlikely○ Neither likely nor unlikely					
_	C Likely					
	○ Very likely					
	○ Not sure○ I am already enrolled in TRICARE Prime.					
-0	H99073_R See Note 23					
'4.	Has TRICARE had any effect on your decision whether or not	to enroll	in a civili	an health p	lan?	
1	○ No, TRICARE has had no effect on my decision whether or no	t to enroll	in a civilia	n health pla	n.	
2	 Yes, I have <u>enrolled</u> in a civilian plan because of TRICARE. Yes, I have <u>dropped</u> a civilian health plan because of TRICARE. 		_	99074		
	Yes, I have <u>aropped</u> a civilian health plan because of ThioAi	16.				
_	Has TRICARE had any effect on your decision whether or not	to be cov	ered by (CHAMPUS	suppleme	ntal
J.	insurance or Medicare supplemental insurance?			99075	• •	
,	○ No, TRICARE has had no effect on my decision whether or no	ot to be cov	ered by s	J upplementa	l insurance) .
2	Yes. I have added supplemental insurance because of TRICA	RE.	0.04.0, 0	арріоніоніа		
3	TO TO THE PARTY OF					
J	Yes, I have <u>dropped</u> supplemental insurance because of TRI	CARE.				
J	() Yes, I have <u>dropped</u> supplemental insurance because of I HI	CARE.				
	Yes, I have <u>dropped</u> supplemental insurance because of 1 HI	CARE.				
	Yes, I have <u>dropped</u> supplemental insurance because of 1 Hi Please indicate how you feel about your TRICARE health plan		ALL THAT	APPLY.		
			ALL THAT			
	Please indicate how you feel about your TRICARE health plan	n. MARK A		Neither Agree nor	Diesgraa	
76.	Please indicate how you feel about your TRICARE health plan H99076A – H99076G	n. MARK A	ALL THAT Agree	Neither	Disagree	Strongly Disagree
76.	Please indicate how you feel about your TRICARE health plan	n. MARK A		Neither Agree nor	Disagree	
76.	Please indicate how you feel about your TRICARE health plan H99076A – H99076G a. Your TRICARE health plan has limited your ability to get the health care you need.	n. MARK A Strongly Agree	Agree	Neither Agree nor Disagree	-	Disagree
76.	Please indicate how you feel about your TRICARE health plan H99076A – H99076G a. Your TRICARE health plan has limited your ability to get the	n. MARK A Strongly Agree	Agree	Neither Agree nor Disagree	-	Disagree
76. A	Please indicate how you feel about your TRICARE health plan H99076A – H99076G a. Your TRICARE health plan has limited your ability to get the health care you need. b. Your TRICARE health plan has limited your ability to see the doctor of your choice.	Strongly Agree	Agree	Neither Agree nor Disagree	Ô	Disagree
76. A	Please indicate how you feel about your TRICARE health plan H99076A – H99076G a. Your TRICARE health plan has limited your ability to get the health care you need. b. Your TRICARE health plan has limited your ability to see	Strongly Agree	Agree	Neither Agree nor Disagree	Ô	Disagree
76. A B	Please indicate how you feel about your TRICARE health plan H99076A – H99076G a. Your TRICARE health plan has limited your ability to get the health care you need. b. Your TRICARE health plan has limited your ability to see the doctor of your choice. c. Your TRICARE health plan does not have good enough health benefits.	Strongly Agree	Agree 4 O	Neither Agree nor Disagree	ô 0	Disagree
76. A B C	Please indicate how you feel about your TRICARE health plan H99076A – H99076G a. Your TRICARE health plan has limited your ability to get the health care you need. b. Your TRICARE health plan has limited your ability to see the doctor of your choice. c. Your TRICARE health plan does not have good enough health benefits. d. Your TRICARE health plan costs too much.	Strongly Agree	Agree	Neither Agree nor Disagree	ó O	Disagree
76. A B C	Please indicate how you feel about your TRICARE health plan H99076A – H99076G a. Your TRICARE health plan has limited your ability to get the health care you need. b. Your TRICARE health plan has limited your ability to see the doctor of your choice. c. Your TRICARE health plan does not have good enough health benefits. d. Your TRICARE health plan costs too much. e. You have recently left the military and don't like the	Strongly Agree	Agree 4 O	Neither Agree nor Disagree	ô 0	Disagree
76. A B C	Please indicate how you feel about your TRICARE health plan H99076A – H99076G a. Your TRICARE health plan has limited your ability to get the health care you need. b. Your TRICARE health plan has limited your ability to see the doctor of your choice. c. Your TRICARE health plan does not have good enough health benefits. d. Your TRICARE health plan costs too much. e. You have recently left the military and don't like the transitional health plan, called the Continuing Health Care	Strongly Agree	Agree 4 O	Neither Agree nor Disagree	ô 0	Disagree
76. A B C D E	Please indicate how you feel about your TRICARE health plan H99076A – H99076G a. Your TRICARE health plan has limited your ability to get the health care you need. b. Your TRICARE health plan has limited your ability to see the doctor of your choice. c. Your TRICARE health plan does not have good enough health benefits. d. Your TRICARE health plan costs too much. e. You have recently left the military and don't like the transitional health plan, called the Continuing Health Care Benefits Program or CHCBP.	Strongly Agree	Agree 4 O	Neither Agree nor Disagree	0 0	Disagree
76. A B C D E	Please indicate how you feel about your TRICARE health plan H99076A – H99076G a. Your TRICARE health plan has limited your ability to get the health care you need. b. Your TRICARE health plan has limited your ability to see the doctor of your choice. c. Your TRICARE health plan does not have good enough health benefits. d. Your TRICARE health plan costs too much. e. You have recently left the military and don't like the transitional health plan, called the Continuing Health Care Benefits Program or CHCBP. f. The military reneged on its promise of free lifetime health	Strongly Agree	Agree 4 O	Neither Agree nor Disagree		Disagree
76. A B C D	Please indicate how you feel about your TRICARE health plan H99076A – H99076G a. Your TRICARE health plan has limited your ability to get the health care you need. b. Your TRICARE health plan has limited your ability to see the doctor of your choice. c. Your TRICARE health plan does not have good enough health benefits. d. Your TRICARE health plan costs too much. e. You have recently left the military and don't like the transitional health plan, called the Continuing Health Care Benefits Program or CHCBP.	Strongly Agree	Agree 4 O	Neither Agree nor Disagree	0 0	Disagree
76. A B C D E	Please indicate how you feel about your TRICARE health plan H99076A – H99076G a. Your TRICARE health plan has limited your ability to get the health care you need. b. Your TRICARE health plan has limited your ability to see the doctor of your choice. c. Your TRICARE health plan does not have good enough health benefits. d. Your TRICARE health plan costs too much. e. You have recently left the military and don't like the transitional health plan, called the Continuing Health Care Benefits Program or CHCBP. f. The military reneged on its promise of free lifetime health	Strongly Agree	Agree 4 O	Neither Agree nor Disagree		Disagred

Your Health	81. During the past 4 weeks, how much did pain interfere with your normal work (including work both outside the home and housework)?		
77 In general would you say your books is:	both outside the home and housework)?		
77. In general, would you say your health is: 5 © Excellent H99077	1 O Not at all 2 O A little bit 3 O Madaratal		
4 O Very good	3 ○ Moderately 4 ○ Quite a bit		
3 ○ Good 2 ○ Fair	5 Extremely		
1 O Poor	20 Zatolioty		
78. The following questions are about activities you might do during a typical day. Does <i>your health</i> now limit you in these activities? If so, how much?	82. These questions are about how you feel and how things have been with you during the past 4 weeks. For each question, please indicate the one answer that comes closer to the way you have been feeling.		
a. <u>Moderate activities</u> , such as moving a table, pushing a vacuum cleaner, bowling, or playing	How much of the time during the past 4 weeks:		
golf H99078A	a. Have you felt calm and peaceful?		
3 O Yes, limited a lot	H99082A		
2 O Yes, limited a little	6 O All of the time		
1 ○ No, not limited at all	5 Most of the time		
h Climbing accord flights of stoirs	4 O A good bit of the time 3 O Some of the time		
b. Climbing <u>several</u> flights of stairs	2 A little of the time		
3 ○ Yes, limited a lot 2 ○ Yes, limited a little 1 ○ No, not limited at all	1 O None of the time		
1 O No, not innited at all	b. Did you have a lot of energy?		
To D. J., the cost describe however had any of the	H99082B		
79. During the <i>past 4 weeks</i> , have you had any of the following problems with your work or other regular	6 O All of the time 5 O Most of the time		
daily activities as a result of your physical health?	4 O A good bit of the time		
dully detivities as a reconst or year priyorear reason.	3 O Some of the time		
a. Accomplished less than you would like	2 O A little of the time		
1 O Yes H99079A	1 O None of the time		
2 O No	c. Have you felt downhearted and depressed?		
b. Were limited in the kind of work or other activities			
—— H99079B	6 O All of the time		
1 () Yes	5 Most of the time		
2 O No	4 O A good bit of the time		
	3 O Some of the time 2 O A little of the time		
80. During the <i>past 4 weeks</i> , have you had any of the	1 None of the time		
following problems with your work or other regular			
daily activities as a result of any emotional problems			
(such as feeling depressed or anxious)?			
a. <u>Accomplished less</u> than you would like			
1 O Yes			
2 O No	USE NO. 2 PENCIL ONLY		
b. Did work or other activities less carefully than			
usual H99080B			
I 199080B I	l .		

1 ○ Yes 2 ○ No

has your physical health or emotional problems interfered with your social activities (like visiting with friends, relatives, etc.)? H99083 5	interwith 5	freed with your social activities (like visiting friends, relatives, etc.)? Ill of the time lost of the time ome of the time little of the time lone of the ti	A ② 8th grade or less B ③ Some high school, but did not graduate C ④ High school graduate or GED D ⑤ Some college or 2-year degree E ④ 4-year college graduate F ⑥ More than 4-year college degree SREDHIGH See Note 21 87. During the last 12 months, how many days of work did you miss due to your own illness or work did you miss due to your own illness or long the last 12 months, how many days of work did you miss due to your own illness or long the last 12 months, how many days of work did you miss due to your own illness or long the last 12 months, how many days of work did you miss due to your own illness or long the last 12 months, how many days of work did you miss due to your own illness or long the last 12 months, how many days of work did you miss due to your own illness or long the last 12 months, how many days of work did you miss due to your own illness or long the last 12 months, how many days of work did you miss due to your own illness or long the last 12 months, how many days of work did you miss due to your own illness or long the last 12 months, how many days of work did you miss due to your own illness or long the last 12 months, how many days of work did you miss due to your own illness or long the last 12 months, how many days of work did you miss due to your own illness or long the last 12 months, how many days of work did you miss due to your own illness or long the last 12 months, how many days of work did you miss due to your own illness or long the last 12 months, how many days of work did you miss due to your own illness or long the last 12 months, how many days of work days. Jan Ja
interfered with your social activities (like visiting with friends, relatives, etc.)? H99083 A	with 5	Il of the time lost of the time lost of the time ome of the time little of the time lone of the time About You About You ion in this section will be used to study how kinds of people view our health care system. Internation will not be used to identify you personal. Internation will not be used to identify you personal. Ion of Spanish/Hispanic/Latino? MARK "No" if Espanish/Hispanic/Latino. Identity you personal. Identit	A
with friends, relatives, etc.)? 5	with 5	Il of the time lost of the time lost of the time ome of the time little of the time lone of the time About You About You ion in this section will be used to study how kinds of people view our health care system. Irmation will not be used to identify you personal. Ingranish/Hispanic/Latino? MARK "No" if Epanish/Hispanic/Latino. H99084 Io, not Spanish/Hispanic/Latino les, Mexican, Mexican American, Chicano les, Puerto Rican les, Cuban	87. During the last 12 months, how many days of work did you miss due to your own illness or in the boxes. 19. (If more than 99 days, mark "99".) 20. Some college or 2-year degree SREDA - SEDA - S
B Some high school, but did not graduate C High school graduate or GED C Altite of the time F More than 4-year college degree SREDHIGH See Note 21 87. During the last 12 months, how many days of p work did you miss due to your own illness or in C B Scome high school, but did not graduate or GED C Altite of the time F More than 4-year college degree SREDHIGH See Note 21 87. During the last 12 months, how many days of p work did you miss due to your own illness or in C E 4-year college facture F More than 4-year college degree SREDHIGH See Note 21 87. During the last 12 months, how many days of p work did you miss due to your own illness or in C I = marked D Some college or 2-year degree SREDHIGH See Note 21 87. During the last 12 months, how many days of p work did you miss due to your own illness or in C I = marked D S Graduate F Ohor than 4-year college degree SREDHIGH See Note 21 87. During the last 12 months, how many days of p work did you miss due to your own illness or in C I = marked D S Ohor than 4-year college degree SREDHIGH See Note 21 87. During the last 12 months F Ohor than 4-year college degree SREDHIGH See Note 21 88. What is your race? MARK ONE OR MORE races to indica	5 A 4 M 3 S 2 A 1 N Informati different This info 84. Are y not S	Il of the time lost of the time ome of the time little of the time lone of the time lone of the time lone of the time About You About You About You Ion in this section will be used to study how kinds of people view our health care system. Intermation will not be used to identify you personal. Ion Spanish/Hispanic/Latino? MARK "No" if H99084 Ion, not Spanish/Hispanic/Latino fes, Mexican, Mexican American, Chicano fes, Puerto Rican fes, Cuban	C High school graduate or GED D Some college or 2-year degree E 4-year college graduate F More than 4-year college degree SREDHIGH See Note 21 87. During the last 12 months, how many days of work did you miss due to your own illness or in the boxes. O I didn't miss any paid work days. Days Write the number in the boxes. Write the number in the boxes. Write the number in the boxes. Then, mark the matching circle below each box. 4 4 S S
4	Informatic different This info 84. Are young 1 O Y Y S O Y Y S	About You About	D Some college or 2-year degree E 4-year college graduate F More than 4-year college degree SREDHIGH See Note 21 87. During the last 12 months, how many days of work did you miss due to your own illness or in the last 12 months, how many days of work did you miss due to your own illness or in last 12 months, how many days of work did you miss due to your own illness or in last 12 months, how many days of work did you miss due to your own illness or in last 12 months, how many days of work did you miss due to your own illness or in last 12 months, how many days of work did you miss due to your own illness or in last 12 months, how many days of work did you miss due to your own illness or in last 12 months, how many days of work did you miss due to your own illness or in last 12 months, how many days of work did you miss due to your own illness or in last 12 months, how many days of work did you miss due to your own illness or in last 12 months, how many days of work did you miss due to your own illness or in last 12 months, how many days of work did you miss due to your own illness or in last 12 months, how many days of work did you miss due to your own illness or in last 12 months, how many days of work did you miss due to your own illness or in last 12 months, how many days of work did you miss due to your own illness or in last 12 months, how many days of work days. (If more than 99
4	Informatic different This info 84. Are young 1 O YO Y	About You About	87. During the last 12 months, how many days of work did you miss due to your own illness or work did you miss any paid work days. 1 didn't miss any paid work days. 1 = mark 2 = unma H99087A Write the number in the boxes. 4 Write the number in the boxes. 4 Then, mark the matching circle below each box. 4 4 4 5 5
About You About You	Information different This info 84. Are young so you so y	About You ion in this section will be used to study how kinds of people view our health care system. In a system of people view our health care system. In a system of people view our health care system. In a system of people view our health care system. In a system of people view our health care system or mation will not be used to identify you personal. In a system of people view our health care system our health care system. In a system of people view our he	87. During the last 12 months, how many days of work did you miss due to your own illness or work did you miss any paid work days. 1 didn't miss any paid work days. 1 = mark 2 = unma H99087A Write the number in the boxes. 4 Write the number in the boxes. 4 Then, mark the matching circle below each box. 4 4 4 5 5
About You About You Information in this section will be used to study how different kinds of people view our health care system. This information will not be used to identify you personally. 84. Are you Spanish/Hispanic/Latino? MARK "No" if not Spanish/Hispanic/Latino? MARK "No" if not Spanish/Hispanic/Latino. 1 No, not Spanish/Hispanic/Latino 2 Yes, Mexican, Mexican American, Chicano 3 Yes, Puerto Rican 4 Yes, Cuban 5 Yes, other Spanish/Hispanic/Latino 85. What is your race? MARK ONE OR MORE races to indicate what you consider yourself to be. A White B Black or African American C American Indian or Alaska Native D Asian (e.g., Asian Indian, Chinese, Filipino, Japanese, Korean, or Vietnamese) E Native Hawaiian or other Pacific Islander (e.g., Samoan, Guamanian, or Chamorro) F More than 4-year college degree SREDHIGH See Note 21 87. During the last 12 months, how many days of p work did you miss due to your own illness or in I didn't miss any paid work days. I = marked 2 = unmarked 2 = unmarked 3 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Informatic different This info 84. Are young 1 O N 2 O Y 3 O Y 4 O Y 5 O Y	About You ion in this section will be used to study how kinds of people view our health care system. In a system of the system	87. During the last 12 months, how many days of work did you miss due to your own illness or incomplete than 99 days, mark "99".) 87. During the last 12 months, how many days of work did you miss due to your own illness or incomplete to your own illness or incomplete than 99 days, and incomplete than 99 days days days days days days days days
About You **None of the time** **About You** **Information in this section will be used to study how different kinds of people view our health care system. This information will not be used to identify you personally. **At you Spanish/Hispanic/Latino?** MARK "No" if not Spanish/Hispanic/Latino.** Mark "No" if not Spanish/Hispanic/Latino.** Mexican American, Chicano 3	Informating different This info 84. Are young to young t	About You ion in this section will be used to study how kinds of people view our health care system. In a system of the system	SREDHIGH See Note 21 87. During the last 12 months, how many days of work did you miss due to your own illness or incomplete than 99 days, mark "99".) SREDHIGH See Note 21 19. Output Days Days Write the number in the boxes. Then, mark the matching circle below each box. 4 4 4 5 5
About You Information in this section will be used to study how different kinds of people view our health care system. This information will not be used to identify you personally. 84. Are you Spanish/Hispanic/Latino? MARK "No" if not Spanish/Hispanic/Latino. H99084 1 No, not Spanish/Hispanic/Latino H99084 1 No, not Spanish/Hispanic/Latino H99084 2 Yes, Mexican American Chicano Yes, Cuban OYes, Cuban OYes, Cuban OYes, Cuban OYes, Other Spanish/Hispanic/Latino 85. What is your race? MARK ONE OR MORE races to indicate what you consider yourself to be. A White D Asian (e.g., Asian Indian, Chinese, Filipino, Japanese, Korean, or Vietnamese) E Native Hawaiian or other Pacific Islander (e.g., Samoan, Guamanian, or Chamorro) 87. During the last 12 months, how many days of pwork did you miss due to your own illness or in work did you miss due to your own illness or in work did you miss due to your own illness or in work did you miss due to your own illness or in work did you miss due to your own illness or in work did you miss due to your own illness or in work did you miss due to your own illness or in work did you miss due to your own illness or in work did you miss due to your own illness or in the base to your own illness or in the your work days. 1	Informating different This info 84. Are your not S 1	About You ion in this section will be used to study how kinds of people view our health care system. irmation will not be used to identify you personal you Spanish/Hispanic/Latino? MARK "No" if Spanish/Hispanic/Latino. H99084 Io, not Spanish/Hispanic/Latino (es, Mexican, Mexican American, Chicano (es, Puerto Rican (es, Cuban)	87. During the last 12 months, how many days of work did you miss due to your own illness or a large of the last 12 months, how many days of work did you miss due to your own illness or a large of the last 12 months, how many days. 1 = mark 2 = unma H99087 A Write the number in the boxes. 4 Write the number in the boxes. 4 Then, mark the matching circle below each box. 4 4 4 5 5
About You Information in this section will be used to study how different kinds of people view our health care system. This information will not be used to identify you personally. 84. Are you Spanish/Hispanic/Latino H99084 1 No, not Spanish/Hispanic/Latino H99084 1 No, not Spanish/Hispanic/Latino H99084 1 No, not Spanish/Hispanic/Latino H99084 2 Yes, Mexican, Mexican American, Chicano Nes, other Spanish/Hispanic/Latino 3 Yes, Puerto Rican 4 Yes, Cuban 5 Yes, other Spanish/Hispanic/Latino 85. What is your race? MARK ONE OR MORE races to indicate what you consider yourself to be. A White B Black or African American C American Indian or Alaska Native D Asian (e.g., Asian Indian, Chinese, Filipino, Japanese, Korean, or Vietnamese) E Native Hawaiian or other Pacific Islander (e.g., Samoan, Guamanian, or Chamorro)	different This info 84. Are young to S 1	ion in this section will be used to study how kinds of people view our health care system. Immation will not be used to identify you personal. In you Spanish/Hispanic/Latino? MARK "No" if Branish/Hispanic/Latino. Ido, not Spanish/Hispanic/Latino Ido, not Spanish/Hispanic/La	87. During the last 12 months, how many days of work did you miss due to your own illness or a large of the last 12 months, how many days of work did you miss due to your own illness or a large of the last 12 months, how many days. 1 = mark 2 = unma H99087 A Write the number in the boxes. 4 Write the number in the boxes. 4 Then, mark the matching circle below each box. 4 4 4 5 5
## Write the number in the boxes. ## Then, mark the mark the marking circle below each box. ## Then, mark the mark "99".) ## Write the number in the boxes. ## Then, mark the marking circle below each box. ## Then, mark the marking circle below each box. ## Then, mark the mark "99".) ## Box	different This info 84. Are young to S 1	ion in this section will be used to study how kinds of people view our health care system. Immation will not be used to identify you personal. In you Spanish/Hispanic/Latino? MARK "No" if Branish/Hispanic/Latino. Ido, not Spanish/Hispanic/Latino Ido, not Spanish/Hispanic/La	work did you miss due to your own illness or in the large of the large
Information in this section will be used to study how different kinds of people view our health care system. This information will not be used to identify you personally. 84. Are you Spanish/Hispanic/Latino? MARK "No" if not Spanish/Hispanic/Latino. H99084 1 No, not Spanish/Hispanic/Latino. H99084 1 No, not Spanish/Hispanic/Latino 2 Yes, Mexican, Mexican American, Chicano 3 Yes, Puerto Rican 4 Yes, Cuban 5 Yes, other Spanish/Hispanic/Latino 85. What is your race? MARK ONE OR MORE races to indicate what you consider yourself to be. A White B Black or African American C American Indian or Alaska Native D Asian (e.g., Asian Indian, Chinese, Filipino, Japanese, Korean, or Vietnamese) E Native Hawaiian or other Pacific Islander (e.g., Samoan, Guamanian, or Chamorro)	different This info 84. Are young to S 1	ion in this section will be used to study how kinds of people view our health care system. Immation will not be used to identify you personal. In you Spanish/Hispanic/Latino? MARK "No" if Branish/Hispanic/Latino. Ido, not Spanish/Hispanic/Latino Ido, not Spanish/Hispanic/La	Days 2 = unma H99087A Write the number in the boxes. 10 Then, mark the matching circle below each box. 10 Then, mark the matching circle bel
Information in this section will be used to study how different kinds of people view our health care system. This information will not be used to identify you personally. 84. Are you Spanish/Hispanic/Latino? MARK "No" if not Spanish/Hispanic/Latino. H99084 1 No, not Spanish/Hispanic/Latino H99084 1 No, not Spanish/Hispanic/Latino H99084 1 No, not Spanish/Hispanic/Latino H99084 2 = unmark the matching circle below each box. 85. What is your race? MARK ONE OR MORE races to indicate what you consider yourself to be. A White B Black or African American C American Indian or Alaska Native D Asian (e.g., Asian Indian, Chinese, Filipino, Japanese, Korean, or Vietnamese) E Native Hawaiian or other Pacific Islander (e.g., Samoan, Guamanian, or Chamorro)	different This info 84. Are y not S 1 N 2 Y 3 Y 4 Y 5 Y	kinds of people view our health care system. In the people view o	Days 2 = unma H99087A Write the number in the boxes. 10 Then, mark the matching circle below each box. 10 Then, mark the matching circle bel
different kinds of people view our health care system. This information will not be used to identify you personally. 84. Are you Spanish/Hispanic/Latino? MARK "No" if not Spanish/Hispanic/Latino. H99084 1	different This info 84. Are young to S 1	kinds of people view our health care system. In the people view o	(If more than 99 days, mark "99".) (If more than 99 (0 0 0) (3 3 3) (4 4) (5 5)
## Write the number in the boxes. ### Write the number in the sup	1 ON 2 OY 3 OY 5 OY	you Spanish/Hispanic/Latino? MARK "No" if Spanish/Hispanic/Latino. H99084 Io, not Spanish/Hispanic/Latino es, Mexican, Mexican American, Chicano fes, Puerto Rican fes, Cuban	(If more than 99 days, mark "99".) (If more than 99 (0 0 0) (3 3 3) (4 4) (5 5)
84. Are you Spanish/Hispanic/Latino? MARK "No" if not Spanish/Hispanic/Latino. H99084 1 No, not Spanish/Hispanic/Latino 2 Yes, Mexican, Mexican American, Chicano 3 Yes, Puerto Rican 4 Yes, Cuban 5 Yes, other Spanish/Hispanic/Latino 85. What is your race? MARK ONE OR MORE races to indicate what you consider yourself to be. A White	84. Are y not S 1	you Spanish/Hispanic/Latino? MARK "No" if Spanish/Hispanic/Latino. H99084 Io, not Spanish/Hispanic/Latino (es, Mexican, Mexican American, Chicano (es, Puerto Rican (es, Cuban)	(If more than 99
84. Are you Spanish/Hispanic/Latino? MARK "No" if not Spanish/Hispanic/Latino. H99084 1	not S 1	Spanish/Hispanic/Latino. H99084 Io, not Spanish/Hispanic/Latino Yes, Mexican, Mexican American, Chicano Yes, Puerto Rican Yes, Cuban	than 99 days, mark "99".) than 99 days, mark "99".) # Then, mark the matching circle below each box. 4 4 5 5
not Spanish/Hispanic/Latino. 1 No, not Spanish/Hispanic/Latino 2 Yes, Mexican, Mexican American, Chicano 3 Yes, Puerto Rican 4 Yes, Cuban 5 Yes, other Spanish/Hispanic/Latino 85. What is your race? MARK ONE OR MORE races to indicate what you consider yourself to be. A White B Black or African American C American Indian or Alaska Native D Asian (e.g., Asian Indian, Chinese, Filipino, Japanese, Korean, or Vietnamese) E Native Hawaiian or other Pacific Islander (e.g., Samoan, Guamanian, or Chamorro) days, mark "99".) days, mark "99".) (3 3) 4 4 4 4 4 4 4 4 4 4 4 4 4	not S 1	Spanish/Hispanic/Latino. H99084 Io, not Spanish/Hispanic/Latino Yes, Mexican, Mexican American, Chicano Yes, Puerto Rican Yes, Cuban	days, mark "99".) days, mark "99".) a Then, mark the matching circle below each box. a 4 4 a 5 5
not Spanish/Hispanic/Latino. H99084 1	not S 1	Spanish/Hispanic/Latino. H99084 Io, not Spanish/Hispanic/Latino Yes, Mexican, Mexican American, Chicano Yes, Puerto Rican Yes, Cuban	mark "99".) ②②② matching circle below each box. ④④ ⑤⑤
1 No, not Spanish/Hispanic/Latino 2 Yes, Mexican, Mexican American, Chicano 3 Yes, Puerto Rican 4 Yes, Cuban 5 Yes, other Spanish/Hispanic/Latino 85. What is your race? MARK ONE OR MORE races to indicate what you consider yourself to be. A White B Black or African American C American Indian or Alaska Native D Asian (e.g., Asian Indian, Chinese, Filipino, Japanese, Korean, or Vietnamese) E Native Hawaiian or other Pacific Islander (e.g., Samoan, Guamanian, or Chamorro) mark "99".) 3 2 2 3 3 3 4 4 6 6 6 6 7 7 8 9 8 9 9 9 H99087AR and H99087BR See Note 22 88. How long have you lived in your current local at 1 Less than 6 months 2 6 months to less than a year 3 1 - 3 years 4 More than 3 years	1 O N 2 O Y 3 O Y 4 O Y 5 O Y	lo, not Spanish/Hispanic/Latino /es, Mexican, Mexican American, Chicano /es, Puerto Rican /es, Cuban	below each box. 4 4 5 5
1 No, not Spanish/Hispanic/Latino 2 Yes, Mexican, Mexican American, Chicano 3 Yes, Puerto Rican 4 Yes, Cuban 5 Yes, other Spanish/Hispanic/Latino 85. What is your race? MARK ONE OR MORE races to indicate what you consider yourself to be. A White B Black or African American C American Indian or Alaska Native D Asian (e.g., Asian Indian, Chinese, Filipino, Japanese, Korean, or Vietnamese) E Native Hawaiian or other Pacific Islander (e.g., Samoan, Guamanian, or Chamorro) H99087AR and H99087BR See Note 22 88. How long have you lived in your current local and 1 Less than 6 months 2 6 months to less than a year 3 1 - 3 years 4 More than 3 years	2	'es, Mexican, Mexican American, Chicano 'es, Puerto Rican 'es, Cuban	44 55
2 Yes, Mexican, Mexican American, Chicano 3 Yes, Puerto Rican 4 Yes, Cuban 5 Yes, other Spanish/Hispanic/Latino 85. What is your race? MARK ONE OR MORE races to indicate what you consider yourself to be. A White B Black or African American C American Indian or Alaska Native D Asian (e.g., Asian Indian, Chinese, Filipino, Japanese, Korean, or Vietnamese) E Native Hawaiian or other Pacific Islander (e.g., Samoan, Guamanian, or Chamorro) H99087AR and H99087BR See Note 22 88. How long have you lived in your current local and 1 Less than 6 months 2 6 months to less than a year 3 1 - 3 years 4 More than 3 years	2	'es, Mexican, Mexican American, Chicano 'es, Puerto Rican 'es, Cuban	(5) (5)
Yes, Puerto Rican Yes, Cuban Yes, Cuban Yes, Cuban Yes, Other Spanish/Hispanic/Latino 85. What is your race? MARK ONE OR MORE races to indicate what you consider yourself to be. A White B Black or African American C American Indian or Alaska Native D Asian (e.g., Asian Indian, Chinese, Filipino, Japanese, Korean, or Vietnamese) E Native Hawaiian or other Pacific Islander (e.g., Samoan, Guamanian, or Chamorro) H99087AR and H99087BR See Note 22 88. How long have you lived in your current local and 1 Less than 6 months 2 6 months to less than a year 3 1 - 3 years 4 More than 3 years	3 O Y 4 O Y 5 O Y	es, Puerto Rican es, Cuban	(5) (5)
4 Yes, Cuban 5 Yes, other Spanish/Hispanic/Latino 85. What is your race? MARK ONE OR MORE races to indicate what you consider yourself to be. A White B Black or African American C American Indian or Alaska Native D Asian (e.g., Asian Indian, Chinese, Filipino, Japanese, Korean, or Vietnamese) E Native Hawaiian or other Pacific Islander (e.g., Samoan, Guamanian, or Chamorro) S	4 O Y	es, Cuban	
85. What is your race? MARK ONE OR MORE races to indicate what you consider yourself to be. A \(\text{ White} \) B \(\text{ Black or African American} \) C \(\text{ American Indian or Alaska Native} \) D \(\text{ Asian (e.g., Asian Indian, Chinese, Filipino, Japanese, Korean, or Vietnamese)} \) E \(\text{ Native Hawaiian or other Pacific Islander} \) (e.g., Samoan, Guamanian, or Chamorro) B \(\text{ MORE races to indicate what you consider yourself to be.} \) ##99087AR and ##99087BR See Note 22 88. How long have you lived in your current local and 1 \(\text{ Less than 6 months} \) 2 \(\text{ 6 months to less than a year} \) 3 \(\text{ 1 - 3 years} \) 4 \(\text{ More than 3 years} \)	5 O Y		
85. What is your race? MARK ONE OR MORE races to indicate what you consider yourself to be. A \(\text{White} \) B \(\text{Black or African American} \) C \(\text{American Indian or Alaska Native} \) D \(\text{Asian (e.g., Asian Indian, Chinese, Filipino,} \) Japanese, Korean, or Vietnamese) E \(\text{Native Hawaiian or other Pacific Islander} \) (e.g., Samoan, Guamanian, or Chamorro) B \(\text{0} \) H99087AR and H99087BR See Note 22 88. How long have you lived in your current local and 1 \(\text{Less than 6 months} \) 2 \(\text{6 months to less than a year} \) 3 \(\text{1 - 3 years} \) 4 \(\text{More than 3 years} \)		es, other Spanish/Hispanic/Latino	
85. What is your race? MARK ONE OR MORE races to indicate what you consider yourself to be. A	95 What	OO, O	
85. What is your race? MARK ONE OR MORE races to indicate what you consider yourself to be. A	95 What		<u>@ @</u> H99087
indicate what you consider yourself to be. A	05 What		9 9
A \(\text{White} \) B \(\text{Black or African American} \) C \(\text{American Indian or Alaska Native} \) D \(\text{Asian (e.g., Asian Indian, Chinese, Filipino, Japanese, Korean, or Vietnamese} \) E \(\text{Native Hawaiian or other Pacific Islander} \) (e.g., Samoan, Guamanian, or Chamorro) 88. How long have you lived in your current local at the local and	indic	t is your race? MARK ONE OR MORE races to ate what you consider yourself to be.	
A \times White B \times Black or African American C \times American Indian or Alaska Native D \times Asian (e.g., Asian Indian, Chinese, Filipino, Japanese, Korean, or Vietnamese) E \times Native Hawaiian or other Pacific Islander (e.g., Samoan, Guamanian, or Chamorro)	maio		88. How long have you lived in your current local
B	A () 1A	Vibite I = marked	,
C	A O V	vriite 2 = unmarked	1 O Less than 6 months
D Asian (e.g., Asian Indian, Chinese, Filipino, Japanese, Korean, or Vietnamese) E Native Hawaiian or other Pacific Islander (e.g., Samoan, Guamanian, or Chamorro)	$B \bigcirc B$	Black or African American	1100000
Japanese, Korean, or Vietnamese) E Native Hawaiian or other Pacific Islander (e.g., Samoan, Guamanian, or Chamorro)	$C \bigcirc A$	merican Indian or Alaska Native	1 = -
E Native Hawaiian or other Pacific Islander (e.g., Samoan, Guamanian, or Chamorro)	$D \cap A$	Asian (e.g., Asian Indian, Chinese, Filipino,	
(e.g., Samoan, Guamanian, or Chamorro)		Japanese, Korean, or Vietnamese)	4 O More than 3 years
(e.g., Samoan, Guamanian, or Chamorro)	FON	lative Hawaiian or other Pacific Islander	
		(e.g. Samoan, Guamanian, or Chamorro)	
SRRACEA - SRRACEE	_		
		SRRACEA - SRRACEE	

89. Please return the completed survey in the postage-paid envelope. Even if you only answered question #1, it is important that you return the survey.

PLEASE RETURN YOUR COMPLETED SURVEY IN THE BUSINESS REPLY ENVELOPE TO:

Office of the Assistant Secretary of Defense Health Affairs Survey Processing Activity c/o Data Recognition Corporation 8900 Wyoming Ave. No. Brooklyn Park, MN 55445

IF YOU ARE RETURNING THE SURVEY FROM ANOTHER COUNTRY, BE SURE TO RETURN THE BUSINESS REPLY ENVELOPE ONLY THROUGH A U.S. GOVERNMENT MAIL ROOM OR POST OFFICE.

FOREIGN POSTAL SYSTEMS WILL $\underline{\mathsf{NOT}}$ DELIVER BUSINESS REPLY MAIL.

THANK YOU

